

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BD	46621	1/21
O.I.P.E. CLASSIFIER			2-7-10
FORMALITY REVIEW	BD	46789	2-11-10
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	

Claim	Date
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	

Claim	Date
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	
144	
145	
146	
147	
148	
149	
150	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

Index of Claims



Application No.

09/479,262

Examiner

Edward J Wojciechowicz

Applicant(s)

YAMAZAKI, SHUNPEI

Art Unit

2815

✓	Rejected
=	Allowed

-	(Through numeral) Cancelled
+	Restricted

N	Non-Eligible
I	Interference

A	Appealed
O	Objected

Claim		Date			
Final	Original				
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
	11				
	12				
	13				
	14				
	15				
	16				
	17				
	18				
	19				
	20				
	21				
	22				
	23				
	24				
	25				
	26				
	27				
	28				
	29				
	30				
	31				
	32				
	33				
	34				
	35				
	36				
	37				
	38				
	39				
	40				
	41				
	42				
	43				
	44				
	45				
	46				
	47				
	48				
	49				
	50				

Claim		Date			
Final	Original				
	51				
	52				
	53				
	54				
	55				
	56				
	57				
	58				
	59				
	60				
	61				
	62				
	63				
	64				
	65				
	66				
	67				
	68				
	69				
	70				
	71				
	72				
	73				
	74				
	75				
	76				
	77				
	78				
	79				
	80				
	81				
	82				
	83				
	84				
	85				
	86				
	87				
	88				
	89				
	90				
	91				
	92				
	93				
	94				
	95				
	96				
	97				
	98				
	99				
	100				

Claim		Date			
Final	Original				
	101				
	102				
	103				
	104				
	105				
	106				
	107				
	108				
	109				
	110				
	111				
	112				
	113				
	114				
	115				
	116				
	117				
	118				
	119				
	120				
	121				
	122				
	123				
	124				
	125				
	126				
	127				
	128				
	129				
	130				
	131				
	132				
	133				
	134				
	135				
	136				
	137				
	138				
	139				
	140				
	141				
	142				
	143				
	144				
	145				
	146				
	147				
	148				
	149				
	150				